

Available Copy

CLIP STAPLE AREA (for additional cross references)

| POSITION           | INITIALS | ID NO. | DATE    |
|--------------------|----------|--------|---------|
| FEE DETERMINATION  | PS       |        | 5/28    |
| O.I.P.E CLASSIFIER |          | 49     | 5/27/73 |
| FORMALITY REVIEW   | LW       | 68904  | 6/8/94  |

### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 (Through numeral) Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

| Claim | Final | Original | Date    |
|-------|-------|----------|---------|
| 1     | ✓     | ✓        | 1/25/82 |
| 2     | ✓     | ✓        | 1/27/82 |
| 3     | ✓     | ✓        | 1/27/82 |
| 4     | ✓     | ✓        | 1/27/82 |
| 5     | ✓     | ✓        | 1/27/82 |
| 6     | ✓     | ✓        | 1/27/82 |
| 7     | ✓     | ✓        | 1/27/82 |
| 8     | ✓     | ✓        | 1/27/82 |
| 9     | ✓     | ✓        | 1/27/82 |
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| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here

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